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| UTILITY<br>PATENT APPLICATION<br>TRANSMITTAL | Attorney Docket No.:    | CS22428RL                                      |
|  | First Inventor:         | Cranfill, David et al.                         |
|  | Title:                  | MULTIFUNCTION TRANSDUCER AND METHOD OF DRIVING |
|  | Express Mail Label No.: | EV203579482US                                  |

(Only for new nonprovisional applications under 37 CFR 1.53(b))

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| APPLICATION ELEMENTS<br>(see MPEP chapter 600 concerning utility patent application contents) | ADDRESS TO:<br>Mail Stop Patent Application<br>Commissioner for Patents<br>P. O. Box 1450<br>Alexandria, VA 22313-1450 |
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|---|--|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form in duplicate<br>(Submit an original and a duplicate for fee processing)<br>2. <input type="checkbox"/> Applicant claims small entity status<br>See 37 CFR 1.27<br>3. <input checked="" type="checkbox"/> Specification Total Pages <input type="text" value="23"/><br>(preferred arrangement set forth below)<br>-Descriptive title of the invention<br>-Cross Reference to Related Applications<br>-Statement Regarding Fed sponsored R&D<br>-Reference to sequence listing, a table,<br>-Background of the Invention<br>-Brief Summary of the Invention<br>-Brief Description of the Drawings (if filed)<br>-Detailed Description<br>-Claim(s)<br>-Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) Total Sheets <input type="text" value="9"/><br>5. Oath or Declaration<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/ divisional with Box 18 completed)<br>i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input type="checkbox"/> Application Data Sheet under 37 CFR 1.76 | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)<br>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)<br>a. <input type="checkbox"/> Computer Readable Form (CFR)<br>b. <input type="checkbox"/> Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies);<br>ii. <input type="checkbox"/> or paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies<br>ACCOMPANYING APPLICATION PARTS<br>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) <input type="checkbox"/> Power of Attorney Statement (when there is an assignee)<br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input type="checkbox"/> IDS <input type="checkbox"/> Copies of IDS Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>15. <input type="checkbox"/> Certified Copy of Priority Document<br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: _____ |
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18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

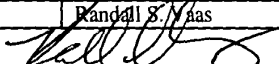
☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) Prior Appl. No.

Prior Appl. information: Examiner:  Group/Art Unit:

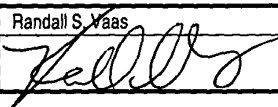
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label  or ☐ Correspondence address below

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| Country   | U.S.A.  | Telephone        | 847-523-2327 | Fax      | 847-523-2350 |
| Name      | Randall S. Vaas   | Registration No. | 34,479       |          |              |
| SIGNATURE |  |                  |              |          | Date         |
|           |   |                  |              |          | 8-28-2003    |

CS22428RL

| <b>FEE TRANSMITTAL</b><br>Patent fees are subject to annual revision<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |   | <b>Complete if Known</b>  |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|--|---|---|---------------------------|--|----------------|--------------|----------|-----------------|----------|----------|------|--------------------|------|--------------------|------|-----|-------------------------------------|------|-------------------|------|-----|-------------------------------------|--------------|------------------|----------|------|---------------------------|------|--------------------|------|------|---|------|------------------------|---------------------------------|------|--|------|-----------------------------------|------|-------|---|------|---------------------------------------|------|----|--|------|---|------|-----|---|------|---|---------------------------------|-----|--|------|------|------|-----|---|------|------|------|-----|--|------|-----|------|-----|------------------|------|-----|------|-----|--|------|-----|------|-----|--------------------------|------|------|------|------|---|------|-----|------|----|----------------------------------|------|------|------|-----|------------------------------------|------|------|------|-----|--------------------------------|------|-----|------|-----|------------------|------|-----|------|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|---|------|-----|------|-----|---|---------------------------|--|--|--|--|
|  |   | Application Number  |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Filing Date   | 8/28/03                   |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | First Named Inventor  | Cranfill, David B. et al. |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Examiner Name   |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Group Art Unit  |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| TOTAL AMOUNT OF PAYMENT  |   | Attorney Docket No.   | CS22428RL                 |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>METHOD OF PAYMENT (check all that apply)</b>  |   | <b>FEE CALCULATION (continued)</b>  |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number <b>502117</b><br>Deposit Account Name <b>Motorola, Inc.</b>  |   | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>1970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="5">Other fee (specify) _____</td></tr> </tbody> </table> |                           | Large Entity   |                | Small Entity |          | Fee Description | Code     | Fee (\$) | Code | Fee (\$)           | 1051 | 130                | 2051 | 65  | Surcharge - late filing fee or oath | 1052 | 50                | 2052 | 25  | Surcharge - late Provisional filing | 1053         | 130              | 1053     | 130  | Non-English specification | 1812 | 2520               | 1812 | 2520 | For filing a request for ex parte Reexamination | 1804 | 920*                   | 1804                            | 920* | Requesting publication of SIR prior to Examiner action | 1805 | 1840*                             | 1805 | 1840* | Requesting publication of SIR after Examiner action | 1251 | 110                                   | 2251 | 55 | Extension for reply within first month | 1252 | 410   | 2252 | 205 | Extension for reply within second month | 1253 | 930   | 2253                            | 465 | Extension for reply within third month | 1254 | 1450 | 2254 | 725 | Extension for reply within fourth month | 1255 | 1970 | 2255 | 985 | Extension for reply within fifth month | 1401 | 320 | 2401 | 160 | Notice of Appeal | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal | 1403 | 280 | 2403 | 140 | Request for oral hearing | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | 1453 | 1300 | 2453 | 650 | Petition to revive - unintentional | 1501 | 1300 | 2501 | 650 | Utility issue fee (or reissue) | 1502 | 470 | 2502 | 235 | Design issue fee | 1503 | 630 | 2503 | 315 | Plant issue fee | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | 1806 | 180 | 1806 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37 CFR § 1.129(b)) | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | Other fee (specify) _____ |  |  |  |  |
| Large Entity   |   | Small Entity  |                           | Fee Description  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Code   | Fee (\$)  | Code  | Fee (\$)                  |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1051   | 130   | 2051  | 65                        | Surcharge - late filing fee or oath  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1052   | 50  | 2052  | 25                        | Surcharge - late Provisional filing  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1053   | 130   | 1053  | 130                       | Non-English specification  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1812   | 2520  | 1812  | 2520                      | For filing a request for ex parte Reexamination                            |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1804   | 920*  | 1804  | 920*                      | Requesting publication of SIR prior to Examiner action                     |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1805   | 1840*   | 1805  | 1840*                     | Requesting publication of SIR after Examiner action                        |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1251   | 110   | 2251  | 55                        | Extension for reply within first month                                     |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1252   | 410   | 2252  | 205                       | Extension for reply within second month                                    |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1253   | 930   | 2253  | 465                       | Extension for reply within third month                                     |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1254   | 1450  | 2254  | 725                       | Extension for reply within fourth month                                    |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1255   | 1970  | 2255  | 985                       | Extension for reply within fifth month                                     |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1401   | 320   | 2401  | 160                       | Notice of Appeal   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1402   | 320   | 2402  | 160                       | Filing a brief in support of an appeal                                     |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1403   | 280   | 2403  | 140                       | Request for oral hearing   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1451   | 1510  | 1451  | 1510                      | Petition to institute a public use proceeding                              |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1452   | 110   | 2452  | 55                        | Petition to revive - unavoidable   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1453   | 1300  | 2453  | 650                       | Petition to revive - unintentional   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1501   | 1300  | 2501  | 650                       | Utility issue fee (or reissue)   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1502   | 470   | 2502  | 235                       | Design issue fee   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1503   | 630   | 2503  | 315                       | Plant issue fee  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1460   | 130   | 1460  | 130                       | Petitions to the Commissioner  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1807   | 50  | 1807  | 50                        | Processing fee under 37 CFR 1.17(q)  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1806   | 180   | 1806  | 180                       | Submission of IDS  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 8021   | 40  | 8021  | 40                        | Recording each patent assignment per property (times number of properties) |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1809   | 750   | 2809  | 375                       | Filing a submission after final rejection (37 CFR § 1.129(a))              |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1810   | 750   | 2810  | 375                       | For each additional invention to be examined (37 CFR § 1.129(b))           |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1801   | 750   | 2801  | 375                       | Request for Continued Examination (RCE)                                    |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1802   | 900   | 1802  | 900                       | Request for expedited examination of a design application                  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Other fee (specify) _____  |   |   |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>FEE CALCULATION</b>   |   |   |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td></tr> <tr><td colspan="4" style="text-align: right;"><b>SUBTOTAL (1) (\$ 750.00)</b></td></tr> </tbody> </table>   |   | Large Entity  | Small Entity              | Fee Description  | Fee Paid       | Code         | Fee (\$) | Code            | Fee (\$) | 1001     | 750  | 2001               | 375  | Utility filing fee | 1002 | 330 | 2002                                | 165  | Design filing fee | 1003 | 520 | 2003                                | 260          | Plant filing fee | 1004     | 750  | 2004                      | 375  | Reissue filing fee | 1005 | 160  | 2005  | 80   | Provisional filing fee | <b>SUBTOTAL (1) (\$ 750.00)</b> |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Large Entity   | Small Entity  | Fee Description   | Fee Paid                  |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Code   | Fee (\$)  | Code  | Fee (\$)                  |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1001   | 750   | 2001  | 375                       | Utility filing fee   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1002   | 330   | 2002  | 165                       | Design filing fee  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1003   | 520   | 2003  | 260                       | Plant filing fee   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1004   | 750   | 2004  | 375                       | Reissue filing fee   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1005   | 160   | 2005  | 80                        | Provisional filing fee   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (1) (\$ 750.00)</b>  |   |   |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>2. EXTRA CLAIM FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Previously Paid**</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>24</td> <td>20</td> <td>4</td> <td>18</td> <td>72</td> </tr> <tr> <td>Independent Claims</td> <td>4</td> <td>3</td> <td>84</td> <td>84</td> </tr> <tr> <td colspan="4">Multiple Dependent</td> <td>280</td> </tr> </tbody> </table><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>* Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>* Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="4" style="text-align: right;"><b>SUBTOTAL (2) (\$ 156.00)</b></td></tr> </tbody> </table> |   | Total Claims  | Previously Paid**         | Extra Claims   | Fee from below | Fee Paid     | 24       | 20              | 4        | 18       | 72   | Independent Claims | 4    | 3                  | 84   | 84  | Multiple Dependent                  |      |                   |      | 280 | Large Entity                        | Small Entity | Fee Description  | Fee Paid | Code | Fee (\$)                  | Code | Fee (\$)           | 1202 | 18   | 2202  | 9    | Claims in excess of 20 | 1201                            | 84   | 2201   | 42   | Independent claims in excess of 3 | 1203 | 280   | 2203  | 140  | Multiple dependent claim, if not paid | 1204 | 84 | 2204                                   | 42   | * Reissue independent claims over original patent | 1205 | 18  | 2205                                    | 9    | * Reissue claims in excess of 20 and over original patent | <b>SUBTOTAL (2) (\$ 156.00)</b> |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Total Claims   | Previously Paid**   | Extra Claims  | Fee from below            | Fee Paid   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 24   | 20  | 4   | 18                        | 72   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Independent Claims   | 4   | 3   | 84                        | 84   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Multiple Dependent   |   |   |                           | 280  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Large Entity   | Small Entity  | Fee Description   | Fee Paid                  |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Code   | Fee (\$)  | Code  | Fee (\$)                  |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1202   | 18  | 2202  | 9                         | Claims in excess of 20   |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1201   | 84  | 2201  | 42                        | Independent claims in excess of 3  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1203   | 280   | 2203  | 140                       | Multiple dependent claim, if not paid                                      |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1204   | 84  | 2204  | 42                        | * Reissue independent claims over original patent                          |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1205   | 18  | 2205  | 9                         | * Reissue claims in excess of 20 and over original patent                  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>SUBTOTAL (2) (\$ 156.00)</b>  |   |   |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.<br>*For Reissues, see above   |   | <b>* Reduced by Basic Filing Fee paid   SUBTOTAL (3) (\$ 40.00)</b>   |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| <b>SUBMITTED BY</b>  |   | <b>Complete (if applicable)</b>   |                           |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Name (Print/Type)  | Randall S. Vaas   | Registration No.  | 34,479                    |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Signature  |  | Telephone   | 847-523-2327              |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Date  | 8-28-2003                 |  |                |              |          |                 |          |          |      |                    |      |                    |      |     |                                     |      |                   |      |     |                                     |              |                  |          |      |                           |      |                    |      |      |   |      |                        |                                 |      |  |      |                                   |      |       |   |      |                                       |      |    |  |      |   |      |     |   |      |   |                                 |     |  |      |      |      |     |   |      |      |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |

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